



# Family/Employee News

News and Information for Muscatatuck SDC and Madison State Hospital  
Families and Employees during the transition to community-based services.

## MEETING ANNOUNCEMENT

The next meeting of the  
**Southeast Regional Project  
Team** will be:

**January 30, 2002**  
10 a.m. - 1 p.m.  
**Stone City Mall**  
Wildflower Room  
3300 W. 16th St., Bedford, IN

## HANDY NUMBERS AND WEB SITES:

### MSDC/MSH Info Hotline:

1-800-903-9822  
[www.IN.gov/fssa/transition](http://www.IN.gov/fssa/transition)

Maintained by FSSA to answer  
employee and family questions.

### FSSA Ombudsman:

1-800-622-4484

Available to respond to your  
comments and questions.

### ARC of Indiana:

1-800-382-9100  
[www.arcind.org](http://www.arcind.org)  
[www.theearclink.org](http://www.theearclink.org)

A statewide group that advocates  
on behalf of people with mental  
retardation and related  
disabilities and their families.

### Area Agency on Aging:

1-800-986-3505  
[www.iaaa.org](http://www.iaaa.org)

AAAs provide case  
management, transportation,  
and other services to older adults  
and people with disabilities. Call  
to find the agency closest to you.

### Southern Indiana Center for Independent Living (SICIL):

1-800-845-6914

Part of Indiana's Independent  
Living Service system, SICIL  
provides people with disabilities  
with information and referral,  
advocacy and other services.

## Workgroup Update

*Each month the Family/Employee  
News will print an update on the  
activities of one of the nine transition  
workgroups. This month's Workgroup  
Update is focused on the work of the  
Mental Illness Transition Workgroup.*

**The Mental Illness Transition  
Workgroup** works to ensure that  
residents of the State Hospitals are  
linked to a community provider,  
have a recent evaluation, and have  
plans for community re-integration  
developed. It further ensures that  
people transition from the hospitals  
to quality services, and do so in a  
timely manner.

The committee's primary focus  
is on adult patients with a Serious  
Mental Illness at Madison State  
Hospital. The first priority was  
to establish guidelines governing  
which patients should remain at  
Madison and those that would be  
considered for transfer. Patients  
with DMHA Forensics as a gate-  
keeper and patients who have  
a CMHC (Community Mental  
Health Centers) as a gatekeeper  
outside the Southeast Region have  
been identified and targeted to  
move to other DMHA state oper-  
ated facilities. All transfers meet  
the criteria established by the sub-  
committee.

- The transfer must be closer to family or county of origin;
- The transfer must in the best interest of the patient (not interfere with treatment);
- There will be no transfer if the anticipated discharge date is greater than nine months.
- Patients within the SE Regional District will not be transferred.

Secondly, the committee wanted patient families to be aware of what was happening or likely to happen with the patient. The individual gatekeepers arranged meetings for the families of MI patients at Madison. These meetings were held in the cities where the gatekeepers' main offices were located and attended by a staff member of DMHA. The intent was threefold: to let the families hear the state perspective from a state employee; to hear the gatekeeper perspective from the provider; and, most importantly, to ask general questions about the process. These meetings were generally attended by families whose loved ones had been at the hospital for more than a year.

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# Workgroup Update

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The dates and location of the meetings were:

**Quinco:** June 26, North Vernon

**LifeSpring:** June 27, Jeffersonville

**Center for Behavioral Health:** June 28,  
Bloomington

**InteCare:** July 11, Indianapolis

**Community MH Center:** July 17,  
Lawrenceburg

From assessments completed on patients by CMHC and state hospital staff, the committee has projected the MI patient census at Madison through June 2002. According to this model, the census should be below the ninety beds recommended by the Configuration Committee for this population at Madison by the end of May. Actual census is running below the projection. Admissions for SMI adults will be opened again once the ninety bed goal is reached.

The MI Transition Sub-Committee meets on the first Tuesday of the month at the public library in Columbus. Members include consumer and family members, advocates, and CMHC personnel. The next meeting is scheduled for December 4, 9 to 11 a.m.

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## About the November Format

The November edition of this newsletter is a combination of both the Family and Employee News. Past issues have had separate "Employee" and "Family" editions - we will return to that format next month. We hope that this month's combined edition will provide both employees and families with useful information to assist them during the transition.

## Notes on On-Going Staff Development: *Focus on Medically Fragile Individuals*

Karen Green-McGowan, an independent consultant, visited Muscatatuck State Developmental Center on Oct. 29 and 30 and met with the staffs from Muscatatuck and the Ft. Wayne State Developmental Center to analyze the services the hospitals provide to medically fragile individuals.

Green-McGowan is a nurse with 36 years of experience in working with individuals who are developmentally disabled. She has also testified as an expert witness for the Department of Justice. Her expertise is in working with individuals with developmental disabilities who have medical and physical disabilities.

During her visit, she provided assistance to staff regarding general approaches for meeting

the needs of individuals who are developmentally disabled with physical disabilities and the medically fragile. She drew on examples from other states that are successfully transitioning individuals from an institutional setting into the community.

Green-McGowan also discussed her experiences in placing medically fragile individuals into the community with Ilene Younger, whose daughter is a resident at Muscatatuck and medically fragile. Green-McGowan and Younger discussed the Health Risk Screening Tool that is used to evaluate and determine risk factors, so that each individual can best be placed into a community.

# Q&A

**Q. Has there been any study on whether the state will save money with a regional center?**

**A.** The need for a regional services center is driven first by the state's desire to improve and enhance how it provides services for people with disabilities. Resources are always a concern, and they are a factor in this process. However, more critical forces on this process come from the need to develop more choice and more options for people with disabilities beyond state-operated facilities - most especially for people with disabilities and their families who want to live in the community.

**Q. What is the safety net for folks moved into the community?**

**A.** Indiana has worked to improve the "safety net" for people served in the community. Some of those improvements include a new toll-free incident reporting line that allows situations where residents have been harmed, or could be harmed to be reported and acted on immediately. A new state ombudsman for DD waiver services now exists who works on behalf of individuals and their families in resolving problems that come up. Further, the state has increased its quality assurance standards, and can sanction

providers for failing to meet those increased standards. Finally, local case managers, service coordinators, and quality assurance monitors will work diligently each day to ensure individual needs and health/safety are protected. In instances where they are not, corrective action is taken, and if necessary, Protection and Advocacy Services and Adult Protective Services are notified immediately.

To see more questions and answers go to:

[www.in.gov/fssa/transition](http://www.in.gov/fssa/transition)

## **Have a question you want answered?**

You can send your own questions in any of the following ways:

✓ Call FSSA toll-free, 24 hours per day:  
**1-800-903-9822**

✓ E-mail:  
[OfficeOfTheSecretary@fssa.state.in.us](mailto:OfficeOfTheSecretary@fssa.state.in.us)

✓ Write to:  
Office of the Secretary  
Indiana Family and Social Services  
Administration  
402 W. Washington St., Room W-461  
P.O. Box 7088  
Indianapolis, IN 46207-7088  
Attention: Muscatatuck/Madison  
Transition

# Contact Us!

FSSA maintains a web site, a toll-free phone number, and this newsletter to keep MSDC and MSH families and employees fully informed. Any family members or guardians who would like to receive this newsletter can call the toll-free number listed below, leave their address information, and ask that they be added to our mailing list.

The web site features the questions discussed during family and employee meetings, the final report from the Governor's

Council on State Operated Care Facilities, updates on the *Olmstead* process, articles, and more.

You can visit the web site at: [www.IN.gov/fssa/transition/index.html](http://www.IN.gov/fssa/transition/index.html).

To request copies of any of the items on the web site (or to send a letter) write to:

**Secretary, FSSA**  
**402 W. Washington St.,**  
**Room W461**  
**Indianapolis, IN 46207-7088**  
**Attn: MSDC/MSH**

You can also send an email to: [OfficeOfTheSecretary@fssa.state.in.us](mailto:OfficeOfTheSecretary@fssa.state.in.us)

Please call **1-800-903-9822** with any comments, questions, or concerns you have. This number is toll-free, and available 24 hours a day. You can also call this number if you have concerns about the services that your loved one receives after leaving MSDC or MSH.

## Family Resource Center

*Family/Employee News* is excited to bring readers a new feature in collaboration with the Center for Disability Information and Referral (CeDIR), part of Indiana University's Indiana Institute on Disability and Community. Each month this space will highlight different disability and transition specific print and video resources available to borrow free-of-charge from CeDIR. The resources listed below can be obtained by calling CeDIR toll-free at 1-800-437-7924. Borrowers can keep the materials up to four weeks and the material will be mailed directly to your home. The only expense to the borrower is the cost of returning the material via US mail.

This month's featured selections:

*"Community & Independence, The Move From New Castle State Developmental Center"*

This video profiles individuals who moved to the community from New Castle State Developmental Center. It includes interviews with families involved in the move, community providers, and people discussing their life at New Castle and their new life in the community. The video is approximately 17 minutes long.

*"Journeys in Progress: Stories in the Community"*

This video portrays the journey of four older adults with developmental disabilities as they discover meaningful and productive leisure and work activities in the community.

For more information on CeDIR, visit their website at:

[www.iidc.indiana.edu/~cedir](http://www.iidc.indiana.edu/~cedir)

## Employee Resource Center

*Family/Employee News* is pleased to bring readers another new feature - this one focused on employee needs. Each month this space will highlight a community, government, or non-profit sponsored resource.

This month's featured resource:

[www.collegeispossible.org](http://www.collegeispossible.org)

College is Possible, a collation of America's colleges and universities, offers a web site that provides a "one-stop-shop" with links and information on books, websites, and brochures recommended by admissions and financial aid professionals - *with special sections on adults returning to school and how to obtain financial aid to pay for school.*

If you don't have access to the Internet, much of the same information is available by calling the U.S. Department of Education's special toll-free number for college information, 1-800-433-3243, and requesting the College Is Possible brochure. This toll-free number already offers callers a great deal of information on preparing and paying for college.